

## DEPARTMENT OF HEALTH SERVICES

714/744 P STREET  
SACRAMENTO, CA 95814

January 3, 1989

TO: All County Welfare Directors  
All County Administrative OfficersLetter No: ~~88-106~~

89-03

SUBJECT: HAND-TYPED MEDI-CAL CARDS FOR MEDI-CAL HEALTH CARE PLAN MEMBERS

The purpose of this letter is to request your assistance in preventing inappropriate issuance of "hand-typed" full complement or proof of eligibility only Medi-Cal cards to members of Medi-Cal Health Care Plans (HCP).

Background

The Department of Health Services (DHS) administers a program whereby Medi-Cal eligibles receive their benefits through an HCP rather than through the fee-for-service (FFS) program. When such coverage is in effect, the Medi-Cal member may receive health care services only through the HCP. Restricted Medi-Cal cards are used by members to access medical services at some HCPs. Other HCP members receive no Medi-Cal cards but use the HCP membership card to access medical services. In no case should an HCP member have a FFS Medi-Cal card unless the member has been removed from the HCP. The Medi-Cal Eligibility Data System (MEDS) has been programmed to suppress FFS cards to HCP members.

If a FFS card is issued to and used by a Medi-Cal HCP member within the same month of eligibility for which a capitation premium is paid, a "duplicate payment" occurs.

Problem

It has come to our attention that "hand-typed" FFS Medi-Cal cards are being issued for HCP members. Since these members must receive health care through the HCP, issuance of a "hand-typed" FFS card has the effect of affording the member "dual" eligibility to which they are not entitled. Further, the Federal Government periodically audits the Department for this type of "dual" or duplicate coverage and disallows all federal monies claimed for these beneficiaries. For this reason, it is critical that no FFS Medi-Cal cards are issued for Medi-Cal HCP members.